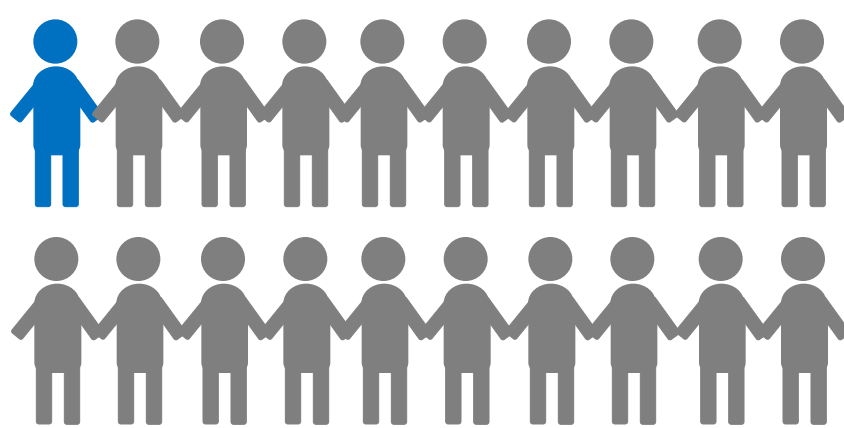


Colorectal Cancer Facts & Prevention



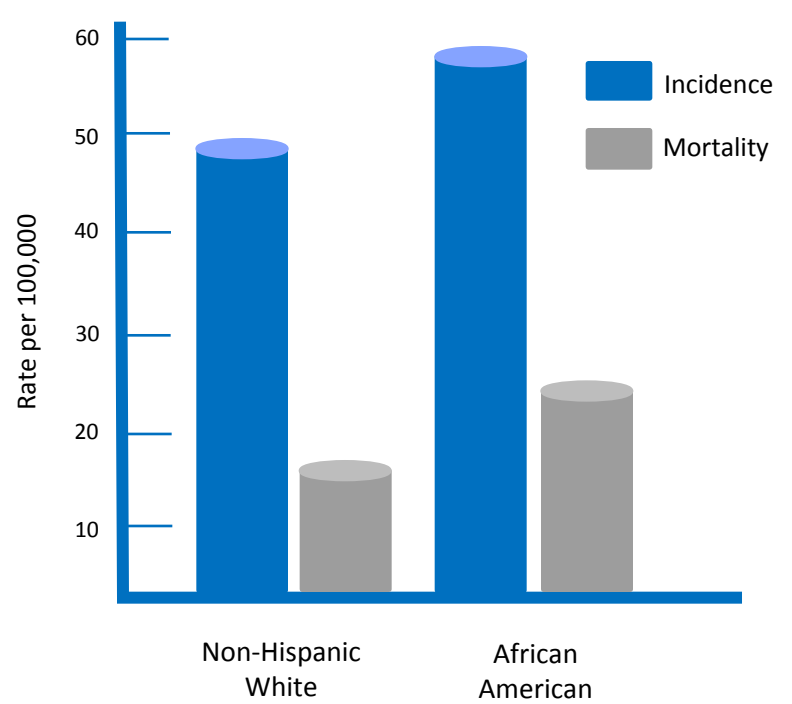
Overall, the lifetime risk of developing colorectal cancer is about 1 in 20 (5%)²



About 142,820 people are diagnosed with colon or rectal cancer every year in the U.S. That is roughly

Colorectal cancer incidence rates are 20% higher and mortality rates are about 45% higher in African Americans than in Non-Hispanic Whites in the U.S.*⁴

391
NEW DIAGNOSES
PER DAY¹



What can I do to lower my risk of getting colorectal cancer?

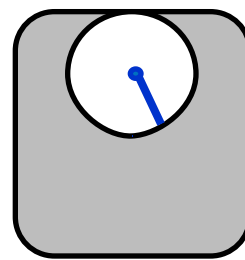
GOOD NEWS!

An estimated **45%** of colorectal cancers in the U.S. could be prevented each year by choosing a healthy diet, being physically active, and regulating body fat.³



KNOW YOUR FAMILY HISTORY

People with a first-degree relative who has had colorectal cancer have 2 to 3 times the risk of developing the disease compared to individuals with no family history⁴



AVOID GAINING WEIGHT EXCESSIVELY AT ANY AGE

High levels of physical activity decrease the risk of colon cancer by as much as

50%⁴

Adults should engage in at least **150 minutes** of moderate-intensity or **75 minutes** of vigorous-intensity exercise per week¹



KNOW YOUR PERSONAL HISTORY

People who have had colorectal cancer are more likely to develop new cancers in other areas of the colon and rectum even if the first cancer was completely removed⁴

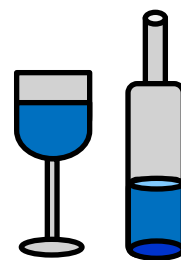


Limit consumption of RED MEATS & PROCESSED foods and beverages⁴

Eat at least **5 portions** of non-starchy fruits and vegetables daily



A 2009 study from the International Agency for Research on Cancer concluded that tobacco smoking causes colorectal cancer⁴



Individuals who have 2-4 alcoholic beverages per day have a

23%

higher risk than those who consume less than 1 drink per day⁴

**GET SCREENED!
FIND IT EARLY!**

Recommendations for colorectal cancer screening for those aged 50+ at average risk⁴

Test	Benefits	Limitations	Intervals
Flexible Sigmoidoscopy	Fairly quick and safe; sedation usually not used; does not require a specialist	Doesn't view upper 2/3 of colon; cannot remove all polyps; may be some discomfort	5 years
Colonoscopy	Can usually view entire colon; can biopsy and remove polyps	Costs more than other tests; higher risk than other tests; full bowel preparation needed	10 years
Double-contrast Barium Enema	Can usually view entire colon; few complications; no sedation needed	Can miss small polyps; cannot remove polyps during test; colonoscopy necessary if abnormalities are detected; full bowel preparation needed	5 years
Computed Tomographic Colonography	Examines entire colon; fairly quick; few complications; no sedation needed; noninvasive	Still fairly new test; cannot remove polyps during test; full bowel preparation needed; colonoscopy necessary if abnormalities are detected	5 years
Fecal Occult Blood Test/Fecal Immunochemical Test	No bowel preparation; sampling is done at home; low cost; noninvasive	May miss some polyps/cancers; slightly more effective when combined with a flexible sigmoidoscopy every 5 years; colonoscopy necessary if abnormalities are detected	Annually

1. American Cancer Society. *Cancer Facts & Figures 2013*. Atlanta: American Cancer Society, 2013.
 2. American Cancer Society. *What are the key statistics about colorectal cancer?* Accessed 2/26/14. Retrieved from <http://www.cancer.org/cancer/colonandrectumcancer/detailedguide/colorectal-cancer-key-statistics>
 3. American Institute for Cancer Research/World Cancer Research Fund Global Network. *Policy and Action for Cancer Prevention: Food, Nutrition, and Physical Activity with an Added US Perspective*. Washington, DC: American Institute for Cancer Research, 2010.
 4. American Cancer Society. *Colorectal Cancer Facts & Figures 2011-2013*. Atlanta: American Cancer Society, 2011.
 *Statistics from 2003-2007. Rates are age-adjusted to 2000 US standard population.



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